**Iowa Healthcare
Innovation and Visioning
Roundtable Meeting**

June 20, 2019

Healthy Communities Workgroup Update and Recommendations

September 2018 Recommendations to Governor Reynolds

Statewide and local partnerships are important resources to support community health infrastructure. *Through these partnerships, communities can build a system to support high need, high cost populations with community-based services and supports, effective care coordination and navigation assistance across clinical care and community support systems*

Acknowledged ongoing population health initiatives focused on building healthier communities including:

- Iowa's Healthiest State Initiative
- Healthy Hometown powered by Wellmark
- Community and Clinical Care (C3) Initiative (begun under Iowa's SIM)

2019 Healthy Communities Workgroup Meetings

January 24

March 15

April 15

June 10 (Virtual)

Reviewed Roundtable Recommendations to Governor Reynolds

IHA ChimeMaps Demonstration

SDOH screening tool discussion

Overview of Community and Clinical Care Initiatives ("C3s")

C3 presentations (Marion County, Linn County and Webster County)

C3 model – discussion of model components

Approaches for sustaining and expanding the C3 model

Review and approve recommendations to the Roundtable to support the expansion of local "Healthy Communities Partnerships" (HCPs)

Recommendations to support expansion of Healthy Community Partnerships (HCPs)

The Healthy Communities Workgroup recommends that the State of Iowa support the expansion of HCPs to additional Iowa communities in the following ways:

1. HCP Model
Support models that incorporate the following essential elements

- A multi-sector coalition of health care and social service providers, health plans, government agencies, and other community-based organizations and businesses
- A committed integrator/lead local organization that convenes and builds trust among collaborative partners and guides data driven strategies
- Screening of consumers for unmet health-related social needs
- Referrals and navigation assistance to help consumers access community-based resources

Healthy Communities Workgroup Recommendations

2. HCP Toolkit
Develop a toolkit for interested communities including, but not limited to, the following essential components:

- Accountable Communities of Health (ACH) model overview and description
- Roles and responsibilities of the HCP within the ACH model
- Links to Care Coordination resources including the Iowa Care Coordination Statewide Strategy
- Social Determinants of Health (SDH) screening tool core questions
- Links to Community Health Needs Assessment & Health Improvement Planning (CHNA & HIP) results
- Description of potential software options to support community care coordination activities (e.g., TAVConnect)
- Fiscal sustainability approaches
- Reporting templates **with standard metrics**

Healthy Communities Workgroup Recommendations

3. Technical Assistance	• Make available robust technical assistance, **including potential learning collaboratives,** to support the establishment of new HCPs and the continued development of existing HCPs. Technical assistance should be tailored to the needs of the community
4. HCP Recruitment	• Actively identify, recruit and/or solicit new HCP communities that meet readiness criteria, including an identified integrator/lead organization, committed multi-sector coalition members, and engagement from the health care community. Also, local HCP stakeholders must demonstrate a willingness to commit time and resources toward achievement of the HCP's mission and goals

Healthy Communities Workgroup Recommendations

5. Focus Areas, Reporting and Data Collection

- Encourage HCPs to focus their activities and interventions on high need, high cost populations that are defined by potentially preventable, high emergency department use and high inpatient hospital use while also recognizing that HCPs are free to define and address specific locally-determined needs and priorities **to help their residents live their best lives**. The state should also establish periodic reporting and data collection processes and procedures to capture and compile HCP activities, progress, and outcomes.

6. Program Administration

- The Department of Human Services should oversee the HCP initiative in consultation with the Department of Public Health

Data Steering Committee Update and Recommendations

Background: 2018 Roundtable Recommendations

To enable transformation of the delivery and payment of care through technology

Realtime Healthcare Information Strategy: Establish a sustainable statewide shared platform to facilitate real time standardized notification at point of service.

- Establish expectation and garner public commitment to participate in real time and statewide exchange of healthcare information
- Establish a governance model for data sharing with multi-stakeholder participation that formalizes the service approach of a federated data sharing model
- Initially target high-need, high-cost population

Data Privacy Strategy: Facilitate information sharing needed to support healthy communities by supporting efforts to streamline state privacy laws and clarify federal requirements

- Support alignment of state privacy laws with HIPAA
- Seek clarification and issue guidance regarding CFR 42 Part 2.Oversight Strategy

Oversight Strategy: Develop a formal multi-stakeholder governance

Governor Reynolds' Response to Roundtable Recommendations Calls for:

Development of a formal governance infrastructure

Periodic progress reports on the implementation of recommendations and any future actions

Stakeholder engagement plan with opportunities for public engagement and interaction of communities, consumers, and state legislators

Creation of measures and milestones of success

Data Steering Committee Work To-Date

Reviewed current functionality, capacity, and planned activities for IHIN, IHC and IHA

Interviewed other states to learn about their Health Information Exchange governance and functionality

Developed proposed recommendations to:

- Establish a governance model consistent with Roundtable recommendations and the Governor's response

- Prioritize use cases (functionality) for the state's Health Information Exchange (IHIN)

Foundational Principles for Data Steering Committee Recommendations

The conceptual infrastructure of the IHIN aligns with the way many states operate their HIEs and there is no reason to walk away from that model.

The current governance of the IHIN, including entities represented on the board and decision-making processes, should be revisited to better reflect the individuals that will be sharing and consuming information from the IHIN.

Any immediate changes to the HIE governance model should seek to avoid statutory modifications and instead focus on the charter, bylaws, and operational procedures of the IHIN to facilitate rapid adoption and stakeholder buy-in

Longer-term future considerations of policy changes will be use case driven by the board and may result in proposed legislative activity (e.g. clarifications of privacy laws).

Data Steering Committee Recommendations

1. HIE Governance Model and Committee Structure

- IHIN Board members should include senior executives with decision-making authority

- **The size of the Board should be manageable so it can operate effectively and achieve consensus**

- The IHIN Board should establish multiple committees or subcommittees including:

  - Strategy, Planning, and Operations
  - Policy (including privacy)
  - Technical (including security)
  - Business/Finance

Data Steering Committee Recommendations

2. Chartered Responsibilities for HIE Governance Model

- Establish and maintain list of priority use cases

- Make recommendations for state actions to address services gaps that need to be filled to achieve Roundtable vision, SIM goals, new emerging priorities

- Make policy recommendations for improved user experience **and provider participation**

- Stay apprised of federal requirements and activities that impact activities in the state and recommend service requirements that comply

- Recommend and regularly evaluate need for updates to technical standards for data exchange

- Recommend and regularly review consent and data sharing policy

- Recommend options to **support financial sustainability of IHIN while providing services that optimize value proposition for participants.**

Data Steering Committee Recommendation #3: IHIN Board Membership

IHIN Board membership should be comprised of the major entities that are participating in health information exchange, ensure urban and rural participation, and include the following representation:

Stakeholder Category	Representatives
State Agencies	DHS, IDPH, IID leadership
Providers	Major health systems Multi-specialty clinics Academic systems FQHCs LTSS SNFs Pharmacy **Behavioral Health Providers** **Non-Affiliated Rural Hospitals**
Health Plans	Including at least the largest private payer as determined by the number of enrollees within IA, MCOs
Health Care Consumers	Could include more specific criteria

Data Steering Committee Recommendations

4. Governance Model Decision-Making

- Decisions made by the IHIN Board should be consensus-driven, where possible, but by super majority in other situations

- A process should be established by the reconstituted board to notify and collect input on decisions from stakeholders who are not represented on the IHIN Board but who will be meaningfully impacted by decisions of the board. **As such, board members perspectives should represent interest beyond those of their respective individual employers.**

Recommendation #5: Priority Use Cases for IHIN by Priority Tier

Tier 1
- Public Health Data Reporting
- Real-time Event Notification
- Results Reporting and Document Delivery to Ambulatory Providers

Tier 2
- Summary of Care Information
- **Facilitating Closed-Loop Referrals for Community-Based Services**
- Data Aggregation for Population Health and Utilization Management Analytics
- Electronic Pre-Authorization

Tier 3
- Dashboards
- Identifying High-Cost/High-Need Populations
- Longitudinal Patient Record
- Cost Price Transparency Data Needs and Tools to Support
- Decision Support Tools